

# **House of Representatives**

General Assembly

File No. 115

January Session, 2015

House Bill No. 6685

House of Representatives, March 19, 2015

The Committee on Aging reported through REP. SERRA of the 33rd Dist., Chairperson of the Committee on the part of the House, that the bill ought to pass.

### AN ACT INCREASING HOME CARE PROVIDER RATES.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- 1 Section 1. Subsection (a) of section 17b-242 of the general statutes is
- 2 repealed and the following is substituted in lieu thereof (*Effective from*
- 3 passage):
- 4 (a) The Department of Social Services shall determine the rates to be
- 5 paid to home health care agencies and homemaker-home health aide
- 6 agencies by the state or any town in the state for persons aided or
- 7 cared for by the state or any such town. [For the period from February
- 8 1, 1991, to January 31, 1992, inclusive, payment for each service to the
- 9 state shall be based upon the rate for such service as determined by the
- 10 Office of Health Care Access, except that for those providers whose
- 11 Medicaid rates for the year ending January 31, 1991, exceed the median
- 12 rate, no increase shall be allowed. For those providers whose rates for
- 13 the year ending January 31, 1991, are below the median rate, increases
- 14 shall not exceed the lower of the prior rate increased by the most
- 15 recent annual increase in the consumer price index for urban

consumers or the median rate. In no case shall any such rate exceed the eightieth percentile of rates in effect January 31, 1991, nor shall any rate exceed the charge to the general public for similar services. Rates 19 effective February 1, 1992, shall be based upon rates as determined by 20 the Office of Health Care Access, except that increases shall not exceed the prior year's rate increased by the most recent annual increase in the consumer price index for urban consumers and rates effective 23 February 1, 1992, shall remain in effect through June 30, 1993. Rates effective July 1, 1993, shall be based upon rates as determined by the Office of Health Care Access except if the Medicaid rates for any service for the period ending June 30, 1993, exceed the median rate for such service, the increase effective July 1, 1993, shall not exceed one per cent. If the Medicaid rate for any service for the period ending June 30, 1993, is below the median rate, the increase effective July 1, 1993, 30 shall not exceed the lower of the prior rate increased by one and onehalf times the most recent annual increase in the consumer price index for urban consumers or the median rate plus one per cent.] The Commissioner of Social Services shall establish a fee schedule for home health services to be effective on and after July 1, 1994. The commissioner may annually modify such fee schedule if such modification is needed to ensure that the conversion to an administrative services organization is cost neutral to home health care agencies and homemaker-home health aide agencies in the aggregate 39 and ensures patient access. Utilization may be a factor in determining 40 cost neutrality. The commissioner shall increase the fee schedule for home health services provided under the Connecticut home-care program for the elderly established under section 17b-342, effective 43 July 1, 2000, by two per cent over the fee schedule for home health services for the previous year. The commissioner shall increase the fee schedule for the Connecticut home-care program for the elderly and the pilot program, established pursuant to section 17b-617 to provide home care services to persons with disabilities, effective July 1, 2015, by not less than two per cent. Not later than June 30, 2016, the commissioner shall determine an additional increase in fees for providers of services to participants of said programs based on the cost

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of services. The commissioner shall implement the increased rate in the fiscal year ending June 30, 2017. The commissioner may increase any fee payable to a home health care agency or homemaker-home health aide agency upon the application of such an agency evidencing extraordinary costs related to (1) serving persons with AIDS; (2) highrisk maternal and child health care; (3) escort services; or (4) extended hour services. In no case shall any rate or fee exceed the charge to the general public for similar services. A home health care agency or homemaker-home health aide agency which, due to any material change in circumstances, is aggrieved by a rate determined pursuant to this subsection may, within ten days of receipt of written notice of such rate from the Commissioner of Social Services, request in writing a hearing on all items of aggrievement. The commissioner shall, upon the receipt of all documentation necessary to evaluate the request, determine whether there has been such a change in circumstances and shall conduct a hearing if appropriate. The Commissioner of Social Services shall adopt regulations, in accordance with chapter 54, to implement the provisions of this subsection. The commissioner may implement policies and procedures to carry out the provisions of this 70 subsection while in the process of adopting regulations, provided notice of intent to adopt the regulations is published [in the Connecticut Law Journal] on the Internet web site of the department and the eRegulations System not later than twenty days after the date 74 of implementing the policies and procedures. Such policies and procedures shall be valid for not longer than nine months.

Sec. 2. Section 17b-343 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective from passage*):

The Commissioner of Social Services shall establish annually the maximum allowable rate to be paid by agencies for homemaker services, chore person services, companion services, respite care, meals on wheels, adult day care services, case management and assessment services, transportation, mental health counseling and elderly foster care. [, except that the maximum allowable rates in effect July 1, 1990, shall remain in effect during the fiscal years ending June 30, 1992, and

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June 30, 1993.] The Commissioner of Social Services shall prescribe uniform forms on which agencies providing such services shall report their costs for such services. Such rates shall be determined on the basis of a reasonable payment for necessary services rendered. The maximum allowable rates established by the Commissioner of Social Services for the Connecticut home-care program for the elderly established under section 17b-342 shall constitute the rates required under this section until revised in accordance with this section. The Commissioner of Social Services shall establish a fee schedule, to be effective on and after July 1, 1994, for homemaker services, chore person services, companion services, respite care, meals on wheels, adult day care services, case management and assessment services, transportation, mental health counseling and elderly foster care. The commissioner [may] shall annually increase [any fee] fees in the fee schedule based on an increase in the cost of services. The commissioner shall increase the fee schedule effective July 1, 2000, by not less than five per cent, for adult day care services. The commissioner shall increase the fee schedule effective July 1, 2011, by four dollars per person, per day for adult day care services. The commissioner shall increase the fee schedule for the Connecticut home-care program for the elderly, established pursuant to section 17b-342, and the pilot program, established pursuant to section 17b-617 to provide home care services to persons with disabilities, by not less than two per cent effective July 1, 2015. Not later than June 30, 2016, the commissioner shall determine an additional increase in fees for providers of services to participants of said programs based on the cost of services. The commissioner shall implement the increased rate in the fiscal year ending June 30, 2017. Nothing contained in this section shall authorize a payment by the state to any agency for such services in excess of the amount charged by such agency for such services to the general public.

This act shall take effect as follows and shall amend the following sections:				
Section 1	from nassage	17h-242(a)		

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Sec. 2   from passage   17b-343
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AGE Joint Favorable

The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

### **OFA Fiscal Note**

### State Impact:

Agency Affected	Fund-Effect	FY 16 \$	FY 17 \$
Social Services, Dept.	GF - Cost	not less than	not less than
		4.4 million	4.4 million

# Municipal Impact: None

# Explanation

The bill requires the Department of Social Services (DSS) to increase the fee schedule for the Connecticut Home Care (CHC) program by at least 2%, effective July 1, 2015. Based on total projected gross program expenditures, a 2% rate increase would cost an additional \$8 million, which results in net costs of \$4.4 million in FY 16 and FY 17.

The bill further requires DSS to 1) annually increase fees for various other homecare related services including homemaker, companion, meal, and transportation services; and 2) determine an additional rate increase for the CHC program, effective July 1, 2015. This rate increase is to be based on the cost of services, which is not defined. It cannot be known in advance what rate increases DSS will establish.

For purposes of illustration, each additional 1% increase would result in a net cost of approximately \$2.2 million annually.

### The Out Years

The annualized ongoing fiscal impact identified above would continue into the future subject to inflation and the rate increases imposed by DSS.

# OLR Bill Analysis HB 6685

### AN ACT INCREASING HOME CARE PROVIDER RATES.

### SUMMARY:

This bill requires the social services commissioner to increase, by at least 2%, the fee schedule for certain services provided through the Connecticut Home Care Program for Elders (CHCPE) and the pilot Connecticut Home Care Program for Disabled Adults (CHCPDA), effective July 1, 2015. By June 30, 2016, the commissioner must determine an additional increase based on service costs, to be implemented in FY 17.

The bill also requires, rather than allows, the commissioner to annually increase the fees for the following services based on cost: homemaking, chore service, companionship, respite care, meals on wheels, adult day care, case management and assessment, transportation, mental health counseling, and elderly foster care.

By law, the commissioner may implement policies and procedures while in the process of adopting regulations about payments to home health care and homemaker-health aide agencies, as long as he provides a notice of intent to adopt regulations within 20 days after the date of policy implementation. The bill requires the commissioner to publish the notice on the department's website and the Secretary of State's online eRegulations system, instead of the *Connecticut Law Journal*. By law, such policies and procedures are valid for a maximum of nine months.

The bill also removes obsolete language about the payment rate for home-based services in the early 1990s.

EFFECTIVE DATE: Upon passage

### **BACKGROUND**

# **Program Descriptions**

CHCPE is a Medicaid waiver and state-funded program that provides home- and community-based services for eligible individuals age 65 and older who are institutionalized or at-risk for institutionalization.

CHCPDA is a state-funded pilot program that provides the same services available under CHCPE to people age 18 to 64 as an alternative to institutional care.

#### Related Bill

HB 6394, reported favorably by the Aging Committee, requires the social services commissioner to increase the fee schedule for certain services, including services provided through CHCPE. It also (1) eliminates identical obsolete language about outdated payment rates and (2) includes the same provision requiring publication of regulation notices on the department website and the eRegulations system, rather than the *Connecticut Law Journal*.

## **COMMITTEE ACTION**

Aging Committee

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Joint Favorable
Yea 13 Nay 0 (03/05/2015)
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